

SPINAL COURIER

The spinal cord disability information source for Arkansans since 1989

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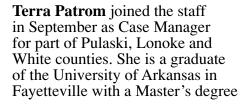
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New Staff at ASCC

Change is often said to be difficult but staff changes at the Arkansas Spinal Cord Commission (ASCC) have proven this old adage wrong. ASCC's addition of three new staff members over the past month has Central Office up and running at full force again.

Judith Henderson began her duties as ASCC Case Management Secretary in August. She will be providing assistance to Case Managers Dan Stell and Daniel Cook. Judith has an Associate of Applied Science in Business with an emphasis in computers and brings a strong customer service and technical assistance background to the agency. She has good office skills and will be a definite asset.

She is a native of Little Rock, having graduated from Mount Saint Mary's, and continues to reside in Little Rock with her cat and dog. Judith spends her leisure time reading and drawing. She is also an avid fan of British comedy.





ASCC is happy to welcome Mary Jo Stanton, Judith Henderson and Terra Patrom (left to right) to the Little Rock office.

in Rehabilitation Counseling. Terra is familiar with ASCC, having completed an Internship in our Russellville office in 1998. It was our good fortune to get her back as *Continued on page 6-see "New Staff at ASCC"*

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Johnson County Muzzleloader Deer Hunt

The U.S. Army Corps of Engineers is conducting a special deer hunt on Lake Dardanelle to help manage a white-tail deer herd and provide a unique recreational opportunity for persons with mobility-impairment due to paralysis or amputation. This hunt is an effort to provide proper access, facilities and other resources needed for a safe and successful recreational experience.

The development of this special hunt is a partnership effort between the Corps of Engineers, the City of Clarksville, the Arkansas Game and Fish Commission, the Disabled Sportsmen of Arkansas and the Wheeling Sportsmen of America. Five (5) permits will be issued by a random drawing to allow qualified applicants to participate in a Special Muzzleloader Deer Hunt in Zone 7, **November 4 and 5** on the Dardanelle Wildlife Management Area, Johnson County Waterfowl Rest Area (special regulations apply in this hunt).

For more information, you may stop by the Ozark Field Office located on 6042 Lock and Dam Road, Ozark, Arkansas 72949-9752, or you may contact Park Ranger **Greig Moe** at **800-844-2129**. (See related articles on pages 6 and 7)

SPINAL COURIER

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With Thanks

ASCC accepts tax deductible donations. The generosity of the many individuals and families, who over the years have made memorial donations, is greatly appreciated. Contributions are used to assist our clients through purchases of equipment and educational resources.

If you would like to make a contribution, please contact the Commission at 501-296-1788 / 800-459-1517 voice / 501-296-1974 TDD, or send your donation to:

AR Spinal Cord Commission 1501 N. University, Suite 470 Little Rock, AR 72207

Donations this quarter from:

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Carl Launius
In Memory of Martha Henderson
Shirley McCluer, M.D
In Memory of Jess Helm
Jay, Linda and Alex Shearer

SPINAL COURIER Letters

Questions • Suggestions • Directions • Answers

White Co. SCI Support Group

Dear Editor:

Spinal cord disability support group meetings are held on the **first Tuesday** of each month at the Hugh Boch Meeting Center, White County Hospital, Searcy, AR, from **10:30** am **to 12:00 noon**. Group discussions cover various topics, including the physical and emotional aspects of

life with spinal cord disability. Members of the group range from persons 20 years post-injury to the newly injured.

The group would like to invite anyone with a spinal cord disability to attend the monthly meetings. For more information, contact me at **501-724-3504**.

Larry Wilson Searcy, AR

From the Director

You know the old adage—is the glass half full or half empty?

Martha Henderson never saw the glass as half anything—there was water in it and it needed to be used! She had a positive attitude that was contagious and she inspired those of us who worked with her over the past twelve years. Martha Henderson came to work for the Arkansas Spinal Cord Commission in the spring of 1988. She was a cancer survivor of over ten years then, but no one knew it. She never told anyone until her cancer returned in 1991. For the past nine years she fought the good fight, battling cancer time and time again, with a bone marrow transplant, chemotherapy, radiation, over 50 surgeries in all. When she asked her doctor what's next? He had to admit he wasn't sure, no one had ever made it this far!

No matter what happened, Martha always came back to work. She called her clients from home when she couldn't come in and took her work with her to do while she received treatments. I walked into the office one day and wondered: who is that at Martha's desk? I didn't recognize the woman with short dark curly hair—it was Martha—her hair had finally grown back and she was sans her wig for the first time in years! Many of us who knew her complained of our aches and pains and thought about going home early—then, in would rush Martha, headed to a chemo-treatment and then on to see a client. She was an inspiration to us all.

She started the Commission's first self-help support group, obtaining a grant to cover transportation costs so more people could attend. It was successful, so she started others, then Caregiver support groups. If there was a need, she found a way to fill it. Martha was concerned about her clients to the end—her last work day was spent with the members of the White County Support Group—she wouldn't miss their annual picnic! Martha lost her twenty-one-year battle with cancer on August 9, 2000. The Arkansas Spinal Cord Commission lost a friend, advocate, spiritual leader and optimist. Working with Martha made us better people. Martha leaves a legacy of caring and commitment not easily found these days.

And I will never look at a half full glass of water without thinking of Martha.

Cheryl Vines

The Olmstead Decision: What Does It Mean To You?

Most of us know about the Americans with Disabilities Act (ADA) and typically we think of accessibility issues like parking and ramps and lowered counters or employment when we think of it. But, under Title II of the ADA, it also requires those agencies funded by public money (states, cities, counties) to meet a high standard of accessibility to programs and services and to make those services available in the least restrictive or most integrated setting. Sounds simple, right? Unfortunately not. Many state agencies and other service providers have maintained a "status quo" in their service delivery plans, somewhat of a "we know what's best for you" persona.

That was until two Georgia women who lived in a state-funded facility wanted to live in the community. Their health care providers agreed that they could live safely in the community with the right supports in place. But the state of Georgia would not facilitate (provide funding) for this move to the most integrated environment!

The women sued the state and the case went all the way to the Supreme Court! In 1999 the Supreme Court ruled in the case, Olmstead (the Georgia Medicaid Director) versus LC and EW (the women), that the state had violated the women's rights under the ADA. This was the first ruling of this significance under Title II of the ADA and set the stage for changes in the way state and other public entities did business. The Health Care Finance Administration (who oversees Medicare and Medicaid programs for the federal government) and the Office of Civil Rights issued letters to state Medicaid directors establishing guiding principles for state Olmstead Plans to assure that this didn't continue to happen. The wheels of government tend to move slowly, and this was the case with the Olmstead decision. Disability advocates expected immediate, sweeping change in the way services were provided. It did not happen. People started asking about our state's Olmstead plan—it did not exist. It was going to take some work, as usual.

Verlon McKay of ADAPT filed a complaint with the Office of Civil rights (OCR) in the Summer of 1999, saying that Arkansas was not in compliance with the Olmstead decision. Around the same time, Cynthia Stone of Arc and Nan **Ellen East** of the Disability Rights Center were also contacting OCR. Ralph Rouse, a former Arkansan who heads the OCR regional office in Dallas, began working with these three and a coalition was formed. Their first job was to inform people, and early this spring they began with two meetings, one a Big Tent Meeting at the State Fair Grounds on May 16th.

The Big Tent Meeting turned out to be monumental, with over 500 people from all over the state present. A proclamation was presented from Governor Huckabee directing the Department of Human Services to develop a working group to evaluate existing community-based services and identify affected populations, improve the flow of information to those in the community and improve opportunities for community placement. Basically, this would develop the Arkansas Olmstead Plan. The Governor directed that consumers, advocates, providers and agency representatives be included in the taskforce and that the task force submit a report of findings and recommendations to the Governor no later than January 1, 2001!

Progress may seem slow, but progress is being made! People are working every week to make sure

International Visitor In Little Rock



Sebastian Ruppe (above) is a visiting professor from the University of Graz, Austria. His interests are in university public relations and services for handicapped students and staff. He and ten other professors and staff members from Graz participated in the exchange program with University of Arkansas at Little Rock (UALR).

ASCC helped with securing a residence and providing equipment for him during his threeweek internship. He visited the McCluer Education and Resource Center on SCI and talked with ASCC staff members. He will be taking many new ideas with him as he returns to Austria.

The Commission was happy to work in unison with **Jim Miller** at UALR and with **Steve Hit** at the Arc and Trinity Court Apartments in order to provide Sebastian with a memorable visit.

the spirit and the letter of the ADA are followed. The Coalition continues to meet every week on Tuesday mornings, as does the Governor's Working Group on Friday afternoons, both in Little Rock.

For additional information about the Olmstead Coalition or the Governor's Olmstead Working Group, contact Chairperson **Cynthia Stone** at the Arc of Arkansas at **501-375-7770** or **Verlon McKay**, ADAPT, at **501-821-4351**.

SPINAL COURIER — 3

Diabetes and Spinal Cord Injury

by David Weitzenkamp, B.A., and Ken Gerhart, M.S. Research Department, Craig Hospital, Englewood, Colorado

Long-term spinal cord injury (SCI) and diabetes? According to some researchers, the two go together like coffee and cream . . . Like Bonnie and Clyde.

Dr. Bill Bauman, for example, has studied diabetes extensively in people with SCI. He writes that as many as 20% of SCI survivors may have adult-onset diabetes; an even larger percentage, he says, don't have symptoms, yet their laboratory blood-work findings suggest their bodies do not use insulin properly.

People with SCI need to be aware of diabetes for two major reasons. First, the effects of SCI may disguise the disease's symptoms. More importantly, SCI can actually increase your risk for becoming diabetic.

What Is Diabetes?

Diabetes is a chronic disease in which the body doesn't make enough *insulin*—a hormone from the pancreas—or somehow doesn't use it correctly. As a result, *glucose* (blood sugar normally carried to the body's cells for fuel) instead builds up in the bloodstream. This extra glucose—called *high blood sugar*—can damage all organs, but especially the eyes, kidneys and blood vessels.

Type I (insulin-dependent) diabetes starts in childhood or young adulthood and requires daily insulin injections. Type II (often called adult-onset diabetes) usually occurs in adults over age 40 and accounts for 95% of all diabetes cases. This type is of most concern to SCI survivors. While it usually can be controlled through diet and exercise, some people also need oral medications or insulin injections.

Diagnosis

Diagnosis of diabetes usually comes from routine blood or urine tests. The appearance of symptoms (see box), high levels of glucose in the urine, or elevated blood-sugar levels on repeated tests are the usual indications.

There are two common types of tests: fasting blood-sugar and glucose tolerance. For the fasting test, your blood is tested for high glucose levels after a night without food. The glucose tolerance test is a little more involved. First, you are tested before drinking a sugary liquid and then again up to five times over the next three hours.

Unfortunately, an SCI can get in the way of diagnosing diabetes. First of all, some of the disease's side effects include tingling in the hands or feet, feeling tired or weak or recurrent infections such as urinary tract infections (UTIs). For SCI survivors, many of these things happen anyway for reasons that have nothing to do with diabetes. Also, if the tingling is below your level of injury, you may not notice it.

Along with disguising the symptoms, SCI can actually increase your risk. Two risk factors for diabetes in the population at large are body composition (i.e., being overweight) and physical inactivity. Both are concerns for people with SCI.

A common consequence of SCI is an alteration of body composition. Muscles that are not—or can't be—used become smaller, while the proportion of your body that is fat increases; this is where the

Symptoms of Diabetes

Early symptoms are:

- Dehydration
- Excessive urination
- Extreme thirst
- Increased appetite and weight loss

Remember: You may have no obvious symptoms at all.

increased risk comes in. People with SCI may not need as much weight to have a high-fat content.

There's another factor: lack of aerobic exercise. The easiest way to reach truly aerobic exercise, where you're breathing hard and "feeling the burn," is by vigorously using your biggest muscles—those in your legs. Since most SCIs affect the legs, fewer and smaller muscles are available to work hard enough for aerobic exercise, thus making truly aerobic exercise difficult.

In addition to body composition and inactivity, other things can increase your risk for diabetes. By far the most important one is age. As you grow older, your chances of developing diabetes increase.

Another factor is a family history of the disease. And, diabetes is slightly more prevalent in women and nonwhite people. Estimates of incidence for diabetes in the over-40 population vary from 2% to 16%; for SCI survivors it may be as high as 20%.

So what are some of the consequences of diabetes? Prolonged periods of too much sugar floating around in your blood can damage your body in many ways, including loss of eyesight, poor wound heal-Continued on page 5-see "Diabetes & SCI"

Diabetes and SCI

Continued from page 6

ing, kidney disease, poorer circulation and increased risk of heart disease.

Fluctuations from high to low blood-sugar levels can lead to serious side effects. Low blood-sugar can lead to major complications and cause organ damage, excessive thirst, frequent urination or even a diabetic coma. The good news is that with careful, relatively easy management of your blood sugar, physicians and researchers believe these complications can for the most part be avoided.

Living With It

So, how do you manage your blood sugar? For many people, it takes a combination of good monitoring and healthy habits. The monitoring often involves a simple home blood test requiring just a drop of blood from a pin prick. More sophisticated techniques don't even need that.

As for the healthy habits, they're much the same as for good general health: Eat a good regular diet, minimize sugar intake, keep away from saturated fats, exercise, moderate your alcohol consumption and check your skin regularly. In the more severe cases, some medications—possibly even insulin injections—might be necessary to keep things under control.

The Stress Factor

It turns out stress has an effect on diabetes and the damage it can do. Your body naturally responds to stress with some kind of fight-or-flight response—which is great if you're in serious danger. In order to give you that burst of energy your body may need to escape a charging rhinoceros, your body releases hormones, which, in turn, cause an increased level of sugar to be released into your blood.

This extra sugar can give you a burst of energy.

But remember, some of this disease's damage comes from excess sugar in the blood, damaging your organs. The extra sugar is fine if it's only in short bursts. Once you've escaped the rhinoceros, everything is back to normal. The problem comes from prolonged stress that maintains a higher level of blood sugar, thus making your diabetes even more harmful.

Your doctor or hospital personnel can provide more detailed information about diagnosing and managing diabetes. The American Diabetes Association (ADA) has programs, all across the country and on the Internet. The ADA web site, www.diabetes.org, contains a wide range of information for average people as well as medical professionals. The site also provides information about diabetes-related activities throughout the country.

Yes, SCI survivors probably have a higher incidence of diabetes. But many of the reasons for this increase are as much from how SCI affects your lifestyles—through diet, weight gain and decreased activity—as from the actual physiological change. Because SCI survivors have the same causes and risks as able-bodied people, they can benefit from the same lifestyle changes, such as diet, weight, exercise and stress management.

Careful management of this disease generally has excellent results.

This article was reprinted with permission by Paralyzed Veterans of America for PN/Paraplegia News, August 2000, pages 24-25.

Spinal Bifida Camp 2000



Pateal Abazajiam (above) climbs the Adventure Course Ropes, a new program at Camp this summer.

Forty three kids with spinal cord disabilities attended Spina Bifida Week at Camp Aldersgate June 26-30. This Camp is a cooperative effort of the Arkansas Spinal Cord Commission, MedCamps of Arkansas and Camp Aldersgate.

After the closing awards ceremony at this year's Camp, Assistant Camp Director Bill Faggard noticed that, in one of the cars in the parking lot, a camper was talking to her mother and crying. Fearing that the tears were from a bad experience at Camp, Bill slowed as he passed the car, just in time to hear the camper tell her mother, "But Mom, I don't want to go home. I love it here!"

Another successful summer at Camp!

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ADSA 2000 Hunting Schedule

The primary focus of the Arkansas Disabled Sportsmen Association (ADSA) is to provide outdoor recreational activities and education for Arkansans with disabilities. ADSA encourages the disabled to become involved in or resume previous leisure activities, as well as teaching how to adapt various activities and equipment to accommodate physical limitations.

ADSA has been involved in several types of hunting: dove, duck, deer and turkey. ADSA is also working on fishing and camping events for the spring of 2001. If you have any questions or suggestions for future outings, feel free to contact **Toney LeQuieu** at **870-933-5254** or **Jimmy Ashley** at **870-934-6875**/**870-935-3301**(FAX).

| <u>Date</u> | Type of Hunt | Location |
|----------------|-------------------|-----------------------------------|
| October 28-29 | Deer Black Powder | Bull Shoals and Des Arc |
| November 4-5 | Deer Black Powder | Clarksville Corps of Engineers |
| November 11-12 | Deer Shotgun | Des Arc |
| November 18-19 | Duck | Waldenberg |
| November 25-26 | Deer Shotgun | Des Arc |
| December 2 | Deer | Mill Creek Higden |
| December 12 | Duck (guided) | Des Arc |
| December 16-17 | Deer Black Powder | Des Arc |

All hunts are subject to cancellation if interest is not shown for that particular hunt. Duck hunts will be scheduled according to interest for the remainder of duck season.

New Staff at ASCC

Continued from page 1

a permanent employee. According to Russellville Case Manager Robert Griffin, "Terra is a very dedicated young woman who works hard in assisting individuals with spinal cord injuries."

She is the mother of two children: a daughter, Jade, age eight, and a son, Bailey, age four. Besides spending as much time as possible with their children, she and husband, Toby, also help her grandfather in maintaining the family farm in Mount Vernon.

Mary Jo Stanton brings twenty years of state experience to ASCC. She has assumed the Executive Secretary duties in the Administrative section of Central Office. Having worked with the Arkansas

Archaeological Survey, UAMS and the Arkansas State Medical Board, Mary Jo's diverse responsibilities create a wealth of knowledge that assist her well in her new position. Chances are, when you call ASCC's Central Office in the future, Mary Jo's will be the first voice you hear. Besides answering the phones, she will be responsible for processing new referrals, providing secretarial support to the **Executive Director, Client Services** Administrator and Commission members and managing ASCC's policies and procedures manuals.

Mary Jo cross-stitches and has recently learned to crochet. In her spare time she also enjoys reading and bowling. She and husband Bill were once avid square dancers.

Accessible Living Video Available

The Arkansas Spinal Cord Commission has produced a new video, *Accessible Living*, which showcases home and vehicle modifications utilized by three individuals with spinal cord disabilities.

The video begins with a tour of a home built to be completely wheel-chair accessible, with helpful ideas for adapting entryways, kitchens, cabinets and bathrooms. *Accessible Living* also includes demonstrations of a barrier-free lift system, designed to transport a person from the bedroom to the bathroom using an overhead track system, and a van adapted with a "kneeling" suspension system and wheelchair lift. The video is approximately 20 minutes long.

Each copy of *Accessible Living* is \$20, which includes shipping and handling (please allow 2-4 weeks for delivery). Mail check, money order or organization purchase order to:

AR Spinal Cord Commission 1501 N. University, Suite 400 Little Rock, AR 72207-5233

For more information, contact the Commission at 501-296-1784/800-459-1517 (voice), 501-296-1794 (TDD) or arkscc@aol.com (e-mail).

Family members include: two daughters, Abbe and Jenny, and son-in-law Rod and, of course, Polo the cat (who, as any cat lover knows, secretly runs the house).

The Commission members and staff are excited to have such qualified individuals joining our agency. Welcome aboard, Judith, Terra and Mary Jo!

Accessible Shooting Range

by Russell Henry, ASCC Case Manager, Batesville, AR

Photo B: Crosswalks extend across

the firing lane to the target frames.

In spite of all the media attention and gun control legislation that often negatively stereotype firearms and shooting enthusiasts, the shooting sports are an American tradition and an interesting recreational activity that, when done safely and responsibly, are enjoyed by persons of all ages. The shooting sports include, but are not limited to: target shooting, trap and skeet, "practical," "plinking," cowboy action, and, of course, an Arkansas favorite, wild-game hunting.

However, an ever-present dilemma facing many shooters is finding a

location where one can safely shoot. Compound this with a spinal cord disability and a person can be discouraged enough to stop pursuing his or her interest in the sport. This is a sad reality because, although a spinal

cord injury can affect how a person might participate in certain activities, it does not necessarily affect that person's level of interest in those activities.

Now for the good news! There is a wheelchair-accessible shooting range in north-central Arkansas. The Sylamore Shooting Range, located approximately eight miles north of Mountain View along Highway 5, officially opened to the public on April 1, 1999. According to **Joseph "Joe" Dabney**, District

Ranger for the Sylamore District of the Ozark and St. Francis National Forests, the idea for a range on Forest Service land originated with members of the Stone County Shooter's Association. The development of the range was a cooperative effort of the U.S. Department of Agriculture's Forest Service and the Arkansas Game and Fish Commission. Ranger Dabney obtained the land. Then, Jim Hinkle, a Commissioner for the Game and Fish Commission, aided in the development of the land and the construction of the range. Ranger Dabney stated, "We wanted to get more

> people to where they could enjoy it (the national forest) and to do more activities there."

For persons who use wheelchairs,

the range offers several features to help accessibility. There is a designated concrete parking pad for persons with disabilities and a five-feet wide walkway, going out to the 100-yard berm, located on the right side of the firing lane (see photo A). At 25-yard intervals, out to 100 yards, there are currently 41-inch wide crosswalks extending across the firing lane to the prefabricated 24- by 24-inch target frames (see photo B). Ranger Dabney informed me that, since this photo was taken, turning radii have been added to



Photo A: Sylamore Shooting Range offers concrete accessible parking, covered shooting area and walkway.

the crosswalks and that there are plans to widen them to five feet as well. There are 12 ambidextrous firing stations that have swingaway seats to adapt to wheelchairs. The stations are on a 15-feet wide, smooth concrete slab that has overhead protection from the elements. An accessible restroom, of the type found throughout the national forest, is available on the site. It is, however, located some distance from the firing line and requires crossing over gravel to get to.

I would like to give kudos to the U.S. Forest Service and the Arkansas Game and Fish Commission for their willingness to respect the Americans with Disabilities Act and to be considerate to the needs of the shooting public. The range is a daylight-use-only range and rules and safety tips are clearly posted. It is monitored by local, county and state police officers as well as Forest Service and Game and Fish Commission law-enforcement officers.

What are you waiting for? Cooler weather and hunting seasons are upon us. Get out to the range and try it!

Searching for Fun and Games

An expanded and improved version of the *Toy Guide for Differently Abled Kids* is out and the toys look great! For those of you who aren't familiar with this resource, the guide is produced by the National Parent Network on Disabilities, the National Lekotek Center

and Toys'R Us. All toys in the catalog have been tested by professionals who specialize in evaluating toys for children with disabilities. In addition to color pictures and full and detailed descriptions, toys are identified by symbols that define the specific play benefits asso-

ciated with each toy, such as social skills or self-esteem. It looks like a terrific "wish book" for kids. You can pick up a copy (which is updated yearly) at any Toys'R Us.

Lekotek is a sixteen-year-old Continued on page 8-see "Fun and Games"

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Fun and Games

Continued from page 7

national organization providing individualized assistance on toys and play for children with disabilities (Lekotek tested all the toys in the Toy Guide for Differently Abled *Kids*). Their helpline can help you adapt toys and provide information on companies that make toys for children with special needs. You can reach their resource helpline at 1-800-366-PLAY (708-328-0001 TDD) or you can write the National Lekotek Center at 2100 Ridge Avenue, Evanston, IL 60201.

For those of you who want online advice on what toys are best, you can contact Dr. Toy at the website: http://www.drtoy.com or you can send e-mail to: **drtoy@drtoy.com**. Dr. Toy has lists of the best toys, the 10 best software/high-tech products, 100 best children's products, best games, and much, much more. The Dragon Fly Toy Company also has a great web page (www.dftoys.com) with their

New Items in Resource Center

The McCluer Education and Resource Center on Spinal Cord Injury has added a number of new items to its collection. If you are interested in checking out any of the resources, please call the Resource Center at 501-296-1792 or 800-459-1517. Some of the new additions include:

- Freedom in Depth (video) includes footage of scuba divers with disabilities enjoying the benefits of water recreation.
- Keeping Our Families Together: A Report of the National Task Force on Parents with Disabilities and their Families (book) addresses the challenges of parenting with a disability and provides discussion of how the defined needs of such families might be met.

- You May Be Able to Adopt (**book**) is a guide to the adoption option and process for prospective mothers with disabilities and their partners.
- Adaptive Baby Care Equipment (book) is a guide to resources and prototypes of adaptive baby care equipment developed to assist mothers with disabilities.
- Challenges and Strategies of Disabled Parents: Findings from a National Survey of Parents with Disabilities (book) includes an overview of barriers to parenting among adults with disabilities including transportation, personal assistance, housing and equipment related issues.

catalog, locate services and a toy club. Remember to ask about latex content before buying toys.

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